

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>RD</i>	75331	
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>S.S.</i>	69134	11-21-88
RESPONSE FORMALITY REVIEW			

Best Available Copy

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1		1/24/82	
2		9/18/82	
3		3/19/83	
4		10/17/83	
5		5/5/84	
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28	✓	✓	✓
29	✓	✓	✓
30	✓	✓	✓
31	✓	✓	✓
32	✓	✓	✓
33	✓	✓	✓
34	✓	✓	✓
35	✓	✓	✓
36	✓	✓	✓
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43	✓	✓	✓
44	✓	✓	✓
45	✓	✓	✓
46	✓	✓	✓
47	✓	✓	✓
48	✓	✓	✓
49	✓	✓	✓
50	✓	✓	✓

Claim	Final	Original	Date
51	✓	1/24/82	
52	✓	9/18/82	
53	✓	3/19/83	
54	✓	10/17/83	
55	✓	5/5/84	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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